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## **CONFIRMATION NO. 8419**

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|--|---------------|---|--------------|-------------|------------------------|---------------------------------------|--|-------------|--|--|
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| ** CONTINUING DATA **********************************  |               |   |              |             |                        |                                       |  |             |  |  |
| ** FOREIGN APPLICATIONS ************************************   |               |   |              |             |                        |                                       |  |             |  |  |
| IF REQUIRED, FOREIGN FILING LICENSE GRANTED<br>** 12/12/2003   |               |   |              |             |                        |                                       |  |             |  |  |
| Foreign Priority claimed   |               |   |              |             | SHEETS TOT             |                                       | AL                                       | INDEPENDENT |  |  |
| met Verified and Acknowledged  | COUNTRY<br>MN |   |              | CLAII<br>28 |                        | CLAIMS<br>4                           |  |             |  |  |
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| TITLE<br>Automated chemical application system and method  |               |   |              |             |                        |                                       |  |             |  |  |
|  |               |   |              |             |                        | ☐ All Fees                            |  |             |  |  |
|  | FEES          | EES: Authority has been given in Paper          |              |             |                        |                                       | 1.16 Fees ( Filing )                     |             |  |  |
| FILING FEE   | No            | to charge/credit DEPÓSIT ACCOUNT for following: |              |             |                        | 1.17 Fees ( Processing Ext. of time ) |  |             |  |  |
| RECEIVED   |               |   |              |             |                        | 1.18 Fees (Issue)                     |  |             |  |  |